

2801

Kimberly L Ware

333 Mamaroneck Avenue, #176
White Plains, NY 10605
Phone (914) 709-9235
kim@mauandkim.com

January 24, 2008

40500

To Whom It May Concern:

I, Kimberly L Ware, would like to request a refund against application #10755996 dated January 10, 2008 as I did not authorize this charge and am unaware of it's origins. In addition, I would like to please be notified of the name and contact information of the individual for whom this application was submitted so that I may pursue a criminal investigation.

Thank you in advance for your prompt attention to this matter.

Kimberly L Ware

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333 Mamaroneck Avenue
Suite 176
White Plains, NY 10605
USA
Phone: 914-374-8229
Fax: 914-375-2934
Email: kimberly@warehousetechnical.com

Fax Cover Sheet

From: 1234 Attn: Refunds	To: <i>Kimberly L Ware</i>
Office location:	Office location:
Office location:	Date: 1-24-08
Fax number: 571-273-6500	Phone number: 571-272-6500

URGENT REPLY ASAP PLEASE COMMENT PLEASE REVIEW FOR YOUR INFORMATION

Total pages, including covers:

2

Comments:

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WareHouse 

Electronic Patent Application Fee Transmittal

Application Number:	10755996								
Filing Date:	13-Jan-2004								
Title of Invention:	Joint spacer								
Refund Ref: 02/12/2008 0030050479									
Credit Card Refund Total: \$405.00									
Master C#: XXXXXXXX1163									
First Named Inventor/Applicant Name:	Peter M. Bonutti								
Filer:	Paul David Bianco/Dinah Fuentes								
Attorney Docket Number:	780-A03-021-5								
Filed as Small Entity									
Utility Filing Fees									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Description</th> <th style="width: 15%;">Fee Code</th> <th style="width: 15%;">Quantity</th> <th style="width: 15%;">Amount</th> <th style="width: 15%;">Sub-Total in USD(\$)</th> </tr> </thead> </table>					Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)					
Basic Filing:									
Pages:									
Claims:									
Miscellaneous-Filing:									
Petition:									
Patent-Appeals-and-Interference:									
Post-Allowance-and-Post-Issuance:									
Extension-of-Time:									

Adjustment date: 02/12/2008 SDIRETA1
 01711/2008 INTEFSW 00000058 10755996 -405.00 OP
 01 FC:2801

Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
Miscellaneous:				
Request for continued examination	2801	1	405	405
Total in USD (\$)				405